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V. Vannal

Practitioner's Docket No. 104

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Ted A. Loxley

Application No.: 09/490,162 Group No.: 2812

Filed: January 22, 2000 Examiner: V. Simkovic

For: PROCESS AND APPARATUS FOR CLEANING SILICON WAFERS

Box Non-Fee Amendment
Assistant Commissioner for Patents
Washington, D.C. 20231

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is
- ☒ a small entity. A statement:
 - ☐ is attached.
 - ☒ was already filed.
 - ☐ other than a small entity.

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. § 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

☒ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Date: 9/19/2001

FACSIMILE

☐ transmitted by facsimile to the Patent and Trademark Office.

Vincent A. Greene
Signature
Vincent A Greene
(type or print name of person certifying)

(Amendment Transmittal [9-19]—page 1 of 4)

EXTENSION OF TERM

NOTE: "Extension of Time in Patent Cases (Supplement Amendments) — If a timely and complete response has been filed after a Non-Final Office Action, an extension of time is not required to permit filing and/or entry of an additional amendment after expiration of the shortened statutory period.

If a timely response has been filed after a Final Office Action, an extension of time is required to permit filing and/or entry of a Notice of Appeal or filing and/or entry of an additional amendment after expiration of the shortened statutory period unless the timely-filed response placed the application in condition for allowance. Of course, if a Notice of Appeal has been filed within the shortened statutory period, the period has ceased to run." Notice of December 10, 1985 (1081 O.G. 34-35)

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply

(complete (a) or (b) as applicable)

- (a) ☒ Applicant petitions for an extension of time for the total number of months checked below:

Extension (months)	Fee for small entity
<input checked="" type="checkbox"/> one month	\$55.00
<input type="checkbox"/> two months	
<input type="checkbox"/> three months	
<input type="checkbox"/> four months	

Fee \$ 55.00

If an additional extension of time is required please consider this a petition therefor.

(check and complete the next item, if applicable)

- ☐ An extension for _____ months has already been secured and the fee paid therefor of \$_____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____

OR

- (b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

-FEE FOR CLAIMS

4. The fee for claims has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY	OTHER THAN A SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE
TOTAL	30	MINUS	30	= 0	= \$	0
INDEP.	7	MINUS	8	= 0	= \$	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						\$
TOTAL						\$ 0
ADDIT. FEE						\$ 0

- * If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20.
 *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3,
 The "Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box
 in Col. 1 of a prior amendment or the number of claims originally filed.

(complete (c) or (d) as applicable)

(c) ☒ No additional fee is required for the claims

OR

(d) ☐ Total additional fee required \$_____**FEE PAYMENT**5. ☒ Attached is a check in the sum of \$ 55.00 for one-month extension☐ Charge Account No. _____ the sum of \$_____

A duplicate of this transmittal is attached.

FEE DEFICIENCY6. ☐ If any additional extension and/or fee is required, this is the request therefor and to charge Account No. _____

AND/OR

☐ If any additional fee for claims is required, charge Account No. _____

Reg. No.: 17,389

Tel. No.: (216) 481-7772

Vincent A. Greene

SIGNATURE OF ATTORNEY

Vincent A. Greene

Type or print name of attorney

25931 Euclid Avenue

P.O. Address

Cleveland, Ohio 44132

EXTENSION OF TERM

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<input checked="" type="checkbox"/>	one month
<input type="checkbox"/>	two months
<input type="checkbox"/>	three months
<input type="checkbox"/>	four months

Fee for
small entity
\$55.00

Fee \$ 55.00



VINCENT A. GREENE, ESQ.
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7589 SADDLEBACK LANE
GATES MILLS, OH 44040

56-55/412
17480

0374

DATE: September 19, 2001

PAY TO THE ORDER OF Commissioner of Patents and Trademarks \$ 55.00

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FIRSTMERIT
CEDAR CENTER OFFICE

Loxley Patent Appl'n (Amendment)
Serial No. 09/490,162
FOR Fee-One-mo extension

Vincent A. Greene

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